



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

JUN-9 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file. MISSOURI STATE HEALTH DEPARTMENT

DATAMASTER SN 201280	DATE OF INSPECTION 06/03/09
LOCATION OF INSTRUMENT (STREET AND CITY) 503 N. Sterling Sugar Creek, Mo. 64054	TIME OF INSPECTION 0320

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED) <i>ok</i>	
<input checked="" type="checkbox"/> COMPUTER <i>ok</i>	<input checked="" type="checkbox"/> DETECTOR <i>ok</i>
<input checked="" type="checkbox"/> PROGRAM <i>ok</i>	<input checked="" type="checkbox"/> FILTERS <i>ok</i>
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <i>49 °C ok</i>	<input checked="" type="checkbox"/> QUARTZ STANDARD <i>ok</i>
<input checked="" type="checkbox"/> FLOW DETECTOR <i>ok</i>	<input checked="" type="checkbox"/> CALIBRATION <i>ok</i>
<input checked="" type="checkbox"/> PUMP HIGH SPEED <i>ok</i>	<input checked="" type="checkbox"/> PRINTER <i>ok</i>
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE <i>03:20 06/03/09 ok</i>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) <i>34.0 °</i>	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 <input checked="" type="checkbox"/> <i>.100</i>	TEST 2 <input checked="" type="checkbox"/> <i>.100</i>	TEST 3 <input checked="" type="checkbox"/> <i>.100</i>
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED) <i>ok</i>
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS <i>0</i>	(0-.04) <i>0</i>	(.05-.09) <i>0</i>	(.10-.14) <i>0</i>	(.15-.19) <i>0</i>	(Over .19) <i>0</i>
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Instrument operating within DHSS guidelines.

Solution Man. *Guth*

Lot # *08280*

Expires *8-11-09* Concen *.10*

INSPECTING OFFICER

SIGNATURE <i>[Signature]</i>	PRINT NAME Sgt. Jonathan Fields
TYPE II PERMIT NUMBER/EXPIRATION DATE <i>720211 10-09-09</i>	TELEPHONE NUMBER 816-252-7058



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08280** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1212** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **August 11, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JONATHAN R. FIELDS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER/INTOXILYZER 5000

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 10/09/07

Number 720211

Expires 10/09/2009

MO 580-0771 (7-88)

E. C. Pollock
Director of State Public Health Laboratory

[Signature]

Director, Department of Health

Lab. 4 (R7-88)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SUGAR CREEK POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201280
06/03/09

TESTING OFFICER:
FIELDS/JONATHAN/R
OFFICER I.D.: 920
PERMIT NUMBER: 720211
EXPIRATION DATE: 10/09/09
MISCELLANEOUS DATA:
MONTHLY MAINT.

--- SUPERVISOR MODE ---

BLANK TEST	.000	03:25
INTERNAL STANDARD	VERIFIED	03:25
EXTERNAL STANDARD	.100	03:25
BLANK TEST	.000	03:26
EXTERNAL STANDARD	.100	03:26
BLANK TEST	.000	03:27
EXTERNAL STANDARD	.100	03:28
BLANK TEST	.000	03:29

N = 3
SIM. = .1
AVG. = .1

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SUGAR CREEK POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201280
06/03/09

ARREST TIME: 03:00
SUBJECT NAME:
TEST/RFI/M
DOB: 04/01/69 SEX: M
STATE/D.L.: MO/00000
ARRESTING OFFICER:
FIELDS/JONATHAN/R
OFFICER I.D.: 920
TESTING OFFICER:
FIELDS/JONATHAN/R
OFFICER I.D.: 920
PERMIT NUMBER: 720211
EXPIRATION DATE: 10/09/09
MISCELLANEOUS DATA:
MONTHLY RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	03:34
INTERNAL STANDARD	VERIFIED	03:34
RADIO INTERFERENCE		

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
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BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
SUGAR CREEK POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201280

06/03/09

03:20

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

HEATERS

SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGH
IJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqrstuvwxyz{|}~
pqrstuvwxyz{|}~

OPERATOR SIGNATURE

Card Stock No.
60021

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